Published quarterly by the Group Insurance Commission for active and retired employees of the Commonwealth of Massachusetts

Mitt Romney, Governor

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Winter 2003

GROUP INSURANCE COMMISSION

Providing Massachusetts State Employees, Retirees, and Their Dependents with Access to Quality Care at a Reasonable Cost

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Indemnity Plan

GIC To Offer Active Employees Pre-Tax Health Care Spending Account

he GIC will be expanding its pre-tax offerings to include a Health Care Spending Account. Soon active employees will be able to enroll in the new Health Care Spending Account (HCSA) for medical expenses in addition to the Dependent Care Assistance Program (DCAP) for child care expenses. Employees can sign up during annual enrollment for a six-month election of \$250 to \$750 beginning July 1. This program will enable you to pay for non-covered health care expenses on a pre-tax basis. On average, participants achieve \$250 in federal and state tax savings for every \$1000 contributed. Use your HCSA to pay for:

- Physician office and prescription drug copayments.
- Medical deductibles and coinsurance amounts.
- Eyeglasses and contact lenses not covered by your plan.
- Orthodontia and dental benefits not covered by your dental plan.
- Hearing aids and durable medical equipment not covered not covered by your health plan.
- Smoking cessation and exercise classes prescribed by your physician.
 And more...

Like the DCAP program, it is important to estimate, as closely as you can, how much you will need for the six months beginning July 1. The amount elected is deducted from your paycheck on a pretax basis. **Any funds you do not use you forfeit as of January 1.** (After this year's annual enrollment, open enrollment for DCAP and HCSA will take place in November for calendar year 2004, the same times as the DCAP open enrollment.)

To enroll, complete an application and submit it to your payroll coordinator by May 9, 2003. (Tax laws limit the program to active employees only.) Your election

continued on page 7

Annual Enrollment is Coming!

APRIL 7 TO MAY 9 FOR CHANGES EFFECTIVE JULY 1, 2003

Read Your GIC Benefit Decision Guide, delivered at the beginning of April to your agency (active employees) or homes (retirees and survivors) for details.

Information to help with your decisions wil also be on our web site

www.mass.gov/gic.



Herbal Supplements Are Not Always Safe



If you take herbal supplements, you are not alone. Two out of five adult Americans take herbal supplements according to a recent survey by the American Dietetic Association. Almost seventy percent of people who take herbal supplements do not tell their doctor, according to the Journal of the American Medical Association. This omission could be life threatening.

You may mistakenly believe that because herbal supplements are natural, they cannot be harmful. However, herbal supplements can adversely interact with prescription and over-the-counter drugs as well as vitamins. Treat them just as you do prescription drugs, letting your doctor know you take them and following package dosage directions. Ask yourself whether the herbal medication has had any positive effect on your symptoms. Don't let the convenience factor of no prescription sway your decision.

Some of the most popular herbal supplements are listed below. Many of these have not been clinically proven to work for the symptoms they are supposed to treat. Take the time to research herbal supplements before you take them. Tufts Health Plan and Harvard Pilgrim Health Care's web sites offer extensive web site tools and online chats to help with these decisions (see pg.7). Tufts Health Plan has also distributed to its doctors a handy reference flier about popular herbal supplements and adverse effects and interactions. The federal government's Food and Drug Administration's (www.cfsan.fda.gov) and Department of Health's (www.healthfinder.gov) web sites also provide a wealth of information.

St. John's Wort (Hypercium Perforatum)

USED FOR

Mild to moderate depression, anxiety, sleep disorder

PHARMACOLOGICAL ACTIONS

Antidepressant, antiviral

ADVERSE EFFECTS

Allergic reactions, nausea, dry mouth, dizziness, gastrointestinal symptoms, increased sensitivity to sunlight, and fatigue.

INTERACTIONS

May decrease plasma levels of some drugs. Adversely interacts with certain drugs used to control HIV. May interact with anticancer, blood thinning, or chemotherapeutic drugs. May limit effectiveness of drugs that help prevent the body from rejecting transplanted organs.

NOT FOR PEOPLE WITH/ARE

Photohypersensitivety, pregnant, nursing

CAUTIONS

Do not give to children; do not combine with prescription drugs

Ginseng (Panax Ginseng)

USED FOR

Improving memory and thinking

PHARMACOLOGICAL ACTIONS

Hypertensive, antifatigue, hypoglycemic, antioxidant, antiinflammatory, anticancer, platelet inhibition, immune stimulant

ADVERSE EFFECTS

Insomnia, diarrhea, euphoria, headache, hypertension, hypotension, nausea, and vaginal bleeding.

INTERACTIONS

May interact with MAO inhibitors, stimulants, hypoglycemic agents, warfarin

NOT FOR PEOPLE WITH/ARE

Cardiovascular disease, hypertension, hypotension, diabetes mellitus, pregnant, nursing

CAUTIONS

Do not take for a prolonged time at high doses.

Ginkgo (Ginkgo Biloba)

USED FOR

Memory impairment, dementia, dizziness, ringing in the ears, blood flow

PHARMACOLOGICAL ACTIONS

Multiple cardiovascular and other effects

ADVERSE EFFECTS

Headache, nausea, vomiting, gastrointestinal symptoms, excessive bleeding, allergic reactions - rash, itching, swelling, dizziness, trouble breathing

INTERACTIONS

May increase effects of anticoagulants, including aspirin

NOT FOR PEOPLE WITH/ARE

On anticoagulation drugs, bleeding disorders, pregnant, nursing

Watch for bleeding, high fever, dehydration, and depression

Watch for bleeding, high fever, dehydration, and depression and report such instances. Tell your doctor that you are using this product before you have surgery or dental work performed.

Black Cohosh (cimicifugia racemosa)

USED FOR

Menopausal symptoms including hot flashes, sweating, sleep disturbance and depressive mood

PHARMACOLOGICAL ACTIONS

Estrogen-like action

ADVERSE EFFECTS

Mild gastric discomfort, headaches, heaviness in the legs, nervous disturbances, allergic reactions - breathing problems chest pain, skin hives/rash

INTERACTIONS

In theory, could interact with hormonal medication

NOT FOR PEOPLE WITH/ARE

Not for the treatment of premenstrual syndrome or menstrual cramping; not for patients at risk of breast cancer.

CAUTIONS

No claims on cardiac or bone density benefits have been made. Large doses may also cause slowed heartbeat and sweating.

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Saw Palmetto (seranoa repens, sabal serrulata)

USED FOR

Benign prostate hyperplasia

PHARMACOLOGICAL ACTIONS

Inhibits testosterone metabolism, anti-inflammatory

ADVERSE EFFECTS

Constipation, decreased libido, diarrhea, headache, hypertension, nausea, urine retention

INTERACTIONS

In theory, may interact with hormonal medication

NOT FOR PEOPLE WITH/ARE

Prostate cancer, women of childbearing age

CAUTIONS

May cause false negative on PSA test.

Echinacea (Echinacea species)

USED FOR

Prevention and treatment of upper respiratory tract infections

PHARMACOLOGICAL ACTIONS

Immune system stimulant, antifungal, anti-inflammatory

ADVERSE EFFECTS

Allergic reaction - breathing problems, chest pain, skin hives/rash; Dizziness, headache, fever, stomach upset

INTERACTIONS

In theory, diminishes effects of immunosuppressants

NOT FOR PEOPLE WITH/ARE

HIV, collagen disease, multiple sclerosis, tuberculosis and autoimmune diseases, pregnant, nursing

CAUTIONS

Do not take for longer than 8 weeks. Rebound of immune system after discontinuation is possible.

Kava (Piper Methysticum)

USED FOR

Anxiety and stress

PHARMACOLOGICAL ACTIONS

Anxiolytic, muscle relaxant, mood enhancer, analgesic sedative, antibacterial, platelet inhibitor

Adverse Effects

Reversible discoloration of skin, nails and hair, visual disturbances, dizziness, stupor, gastrointestinal discomfort, eye problems, fatigue, liver damage, allergic reactions - breathing problems, chest pain, skin hives/rash Increases effect of sedatives and alcohol.

NOT FOR PEOPLE WITH/ARE

Renal disease, thrombocytopenia, neutropenia, pregnant, nursina

CAUTIONS

Avoid concomitant use with antidepressant, sleep, cancer, and rheumatoid arthritis medications. Avoid long-term use.



Sources: Tufts Health Plan and, National Center for Complementary and Alternative Medicines

GIC's Early Risk Intervention Program Averts Complications, Enhances Best Practices

aking nitrates with Viagra® can have lethal consquences. In an alarming situation, this drug combination was prescribed to a Commonwealth PPO patient — by different doctors. In another case, a patient with epilepsy was prescribed Wellbutrin®, and another enrollee who had had congestive heart failure was prescribed Metformin® – both are life-threatening combinations. One heart attack patient was not prescribed beta-blockers, while another was not prescribed cholesterol lowering drugs, despite best practice protocols to do so. A diabetic patient was not prescribed an ACE inhibitor, contrary to best practice protocols. Fortunately, the GIC's PPO Early Risk Intervention (ERI) Program caught these potentially deadly errors, averting the potential for serious harm.

Since its inception on July 1, 2001, the ERI program has helped improve the care of over 2,500 people resulting in 977 care changes. Of these, 95 people could have had potentially fatal errors like the examples above. Less serious errors, but those that compromise quality of life, included no eye exam for a diabetic patient, no cholesterol test for one patient with diabetes and another who survived a heart attack, and no liver test for a patient on cholesterol-lowering drugs. Sometimes there are legitimate reasons for these apparent deviations from best practices, but sometimes there are not. Either way, a timely intervention and inquiry helps.

How does the program work? Cutting edge software reviews members' pharmacy, lab, medical claim information and demographic data. When the software detects inconsistencies with best medical practices, the Commonwealth PPO contacts the member's physician to inform him or her of the potential danger. The bottom line for this innovative program — PPO members enjoy peace of mind and higher quality care.

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The GIC Attacks Skyrocketing Health Care Costs Saving An Estimated \$109 Million



The GIC continues to attack the factors that are driving up health care costs, producing results for both the Commonwealth and its employees and retirees. The results have paid off with the GIC consistently keeping health care premium increases below both the state and the national averages. Over the last five years, the GIC's premiums have increased 28.8%. Mercer Human Resource Consulting estimates that Massachusetts' average premium costs have increased 47.8% and the nation's have increased a whopping 55.0%. Applying these percentages, the GIC has saved more than \$109 million over the state trend and more than \$150 million over the national trend.

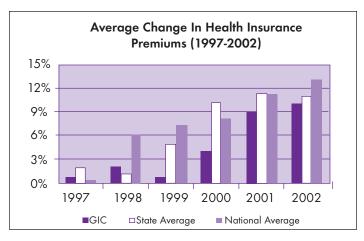
We continue to aggressively pursue multiple avenues to control costs:

Medical Mistakes: The GIC has been at the forefront of improving patient safety, requiring our plans to gather data and improve admissions to hospitals that meet the Leapfrog standard for patient safety. Similarly, we implemented the Early Risk Intervention program for PPO members (see related article).

Prescription Drug Costs: The GIC successfully leveraged its pharmacy benefit manager (PBM) procurement to negotiate bigger prescription drug discounts, saving the Commonwealth an average \$4.4 million per year. We also instituted a three-tier copayment system to provide incentives for members to use generic or preferred brand name drugs. We also put in place drug intervention programs to catch potential adverse interactions for seniors taking too many drugs or drugs that are not appropriate for the elderly, as well as multiple prescriptions for controlled medications.

Provider Payments: The GIC discovered that, for the same procedure, providers were charging the Indemnity Plan substantially higher amounts than they were charging other plans. It became apparent that hospitals and outpatient providers were using the Indemnity Plan to subsidize the discounts they had given to HMOs. In FY99 the GIC instituted Market Based Reimbursement schedules to bring the Indemnity Plan's charges in line with other plans. We instituted a similar program for out-of-state providers for FY03.

Holding Plans Accountable for Quality and Cost: The GIC uses all of our procurements to get the most for the taxpayers' and enrollees' money. Extensive data gives us the tools we need to be tough negotiators. Our contracts hold plans accountable for many standards, including patient safety and disease management benchmarks. We regularly audit our plans to discover inefficiencies in an effort to improve service delivery. We hold regular operations meetings with our self-insured plans and conduct



annual site visits with our HMOs to ensure ongoing collaboration and cooperation. The GIC also implemented risk adjustment for changes that occur during annual enrollment. We pay plans that have older, sicker enrollees more than those with younger, healthier enrollees.

Aging Population: The GIC has put in place many disease management programs to help coordinate and streamline care. Some of these include the Coronary Artery Disease Program, Do It Diabetes Program and Premier Health Plan for enrollees with chronic medical conditions.

Collaboration

The GIC is an active member of leading players in the health care industry: The Massachusetts Healthcare Purchasers Group, Associated Industries of Massachusetts (AIM) Health Care Committee, Massachusetts Health Data Consortium and Massachusetts Coalition for the Prevention of Medical Errors. This enables us to be at the forefront of shaping health care policy to improve quality and contain costs.

Patients are the GIC's Partners: This newsletter is just one of the ways we assist you, our enrollees, to take charge of your health. Our web site offers another venue for giving you the tools you need to be an informed health care consumer. Our health fairs also provide screenings and information to help you become an informed health care consumer.

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Check Out Your Hospital Before You Have Surgery. It Could Save Your Life

Tools you need to research your hospital options. Tools you need to research your hospital options are now available! You can now find out which area hospitals meet standards for patient safety by logging onto the Leapfrog Group's web site (www.leapfroggroup.org). The Leapfrog Group is a national coalition of large employers and government agencies committed to improving patient safety; the GIC was the first Massachusetts organization to join.

The following three measures could save up to 58,300 lives per year and prevent 522,000 medication errors if implemented by all non-rural hospitals in the United States, according to research conducted by Dartmouth Medical School.

- Physicians' use of computerized prescription ordering systems (CPOE)
- Selection of hospitals with extensive experience for certain high-risk conditions and procedures
- Staffing Intensive Care Units (ICUs) with boardcertified critical care physicians

The GIC will provide this information to you in our annual enrollment Benefit Decision Guide. The report will also be available with the Mass Healthcare Purchaser Group's HMO Report Card, available at our annual enrollment health fairs, and on our web site. The Leapfrog criteria and other hospital comparison information, such as number of patients treated and mortality rates, are also available on our web site's Select Quality Care section, provided by CIGNA HealthCare. Enter GIC as your user name and MA as your password.

GIC staff visited our HMOs for annual site visits. The HMOs discussed their programs for improving health care quality.



Fallon Community Health Plan offers a research area at their health centers. Patients can check out videos, cassettes, and books to find out more about their condition. Lynn Theabeault, librarian of the Leominister center, describes how patients use the facility.

Medical Conditions May Lead to Sadness, Frustration and Hopelessness

If you have a chronic illness, you have a higher risk than the general population for depression. Common symptoms of depression include:

- Ongoing sad mood
- Loss of interest or pleasure in activities you once enjoyed
- Significant change in appetite or weight
- Oversleeping or difficulty sleeping
- Loss of energy
- Feelings of worthlessness or guilt
- Recurrent thoughts of death or suicide

A 1990 study published in *General Hospital Psychiatry* study estimates that depression occurs in over 40% of high medical care users, and anxiety occurs in 22%. Chronic pain conditions, including rheumatoid arthritis, back and pelvic pain, and irritable bowel syndrome frequently correspond with feelings of depression, anxiety and alcohol abuse. This study found the following prevalence of depression with the corresponding medical conditions.

Depression for the general population is 17.3%:

Condition	With Depression
Arthritis	25.3%
Cancer	30.3%
Diabetes	22.7%
Coronary Heart Disease	34.6%
Chronic Lung Disease	30.9%
Neurological Disorders	37.5%
Parkinson's	40.0%
Stroke	30%-60%

If you or someone you care about has one of these medical conditions, seek help immediately if you experience signs of depression. HMO members — talk to your primary care physician for a referral to a behavioral health expert. Indemnity, PLUS, and PPO members — contact United Behavioral Health for assistance.



Lynn Ostrowski, Health Program Manager for Health New England, showed us materials for HNE's innovative ACE and Furlis asthma education program for children and their families.

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Complimentary Cardiovascular Screening Will Return to This Year's GIC Health Fairs

he Boston Heart PartyTM will return to this year's GIC health fairs. Last year, 1,286 GIC enrollees took advantage of the free tests, which screened for abnormal blood pressure, cholesterol, and glucose levels. Fifty-two percent of participants were found to be at risk for cardiovascular disease. Risk factors include increasing age, gender (male), heredity, smoking, high cholesterol, high blood pressure, physical inactivity, obesity and having diabetes.

Heart disease is the leading cause of death for American men and women. Take advantage of these free screenings and then take action. If you are at risk for cardiovascular disease (CVD), talk with your physician. He or she can assist you with making important lifestyle changes to help reduce your risk of CVD. To find a health fair near you, see your Benefit Decision Guide, the spring issue of For Your Benefit, and our web site at the beginning of April.



In recognition of the GIC's commitment to the cardiovascular health of Massachusetts state employees and retirees, Pfizer Inc., sponsor of the Boston Heart PartyTM, presented GIC staff with a plaque. (From left to right) The GIC's Paul Murphy, Supervisor of Operations, Nancy Bolduc, Director of Operations, and Judy Settana, Supervisor of the Public Information Unit are pictured with Susan Donnelly of Pfizer.

Letters to the Editor

"My husband died on July 24, 2002 after a valiant 3 year battle with multiple myeloma. I am so thankful we have GIC Indemnity Plan. Sally Ryder, our case manager, took care of everything. She was always so kind and helpful. All the hospitals commented that they wished all insurance people were that easy to deal with. At times like that, the last thing you need is insurance headaches. Thank you GIC."

P. Moore, Monument Beach, MA

The GIC welcomes your feedback. We will include selected letters in our newsletter. Or, submit a letter and request that we not reprint it. The GIC reserves the right to edit your comments for clarity and space considerations. All letters must be signed with your name and address. Send letters to the editor to Cynthia McGrath, Editor, *For Your Benefit*, Group Insurance Commission, PO Box 8747, Boston, MA 02114-8747.

GIC Q & A Child Turning Age 19

- Q) My child is turning age 19. How can he or she continue health coverage?
- A) Unmarried dependent coverage ends at the end of the month in which the dependent turns age 19. If the dependent is a full-time student, you must apply for student coverage, and, if approved, must re-certify student eligibility twice a year. To apply for student coverage, complete a Statement of Student Coverage application for the health plan with which you have coverage. If your dependent is not a full-time student, or he ceases to be a full-time student, he or she is eligible to continue health insurance coverage for up to 36 months on a full-cost basis through COBRA, or may continue coverage through nongroup conversion. Insureds with dependent children turning age 19 will automatically receive forms and instructions in the mail. Student Coverage and Dependent COBRA applications are on our web site. Student Coverage applications and non-group conversion applications are available through your health plan. For other GIC questions and answers, see your GIC Coordinator or log onto the "Your GIC Records" section of our web site: www.mass.gov/gic.

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GIC Indemnity Plan to Change its Name to Commonwealth Indemnity Plan

o help eliminate confusion surrounding the GIC and three of our health plans, we are changing the name of the Indemnity Plan, effective July 1, 2003. The GIC Indemnity Plan, the GIC Indemnity Plan PLUS, and the GIC Indemnity Medicare Extension Plan (OME), will change to the Commonwealth Indemnity Plan, the Commonwealth Indemnity Plan PLUS, and the Commonwealth Indemnity Medicare Extension Plan (OME), respectively.

The new names more accurately reflect who the plans are for — Commonwealth employees, retirees, and their families. Plan benefits will remain the same. The GIC is in the process of selecting the Plan administrator for a new contract effective July 1, 2003.

Additional information about the Plan name change will be in your Benefit Decision Guide.

GIC Will Offer Active Employees An Easy Pre-Tax Means to Pay For Non-Covered Medical Expenses

continued from page 1

will be deducted from your paycheck on a bi-weekly basis, plus a small administrative fee of \$4.50 per month. As you and your family incur expenses, submit a claim form with your receipt to the program administrator, Sentinel Benefits. Sentinel will process reimbursement claims and send direct deposits to your bank on a weekly basis. During annual enrollment see your payroll coordinator for forms and brochures; they will also be our website. Questions? Contact Sentinel at 1-800-819-9833.



GIC's Executive Director, Dolores L. Mitchell served as moderator at the Mass Health Data Consortium's HealthMart. The panel discussed today's health market and was comprised of health plan and hospital CEOs and Wendy Warring, Commissioner of the Division of Medical Assistance.

Benefit Access

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GIC (Commonwealth) Indemnity Plan,	1-800-442-930		
GIC (Commonwealth) Indemnity Plan PLUS	www.plusaccess.com		

GIC (Commonwealth) Indemnity Medicare Extension (OME) (UniCare)

Commonwealth PPO 1-800-870-9488
(Tufts) www.tuftshealthplan.com

Mental Health, Substance 1-888-610-9039
Abuse, EAP - UBH www.unitedbeavioralhealth.com

Prescription Drugs - Express Scripts 1-877-828-9744

GIC HMOs

www.express-scripts.com

www.nhp.org

1-800-462-0224

1-800-867-2000

www.tuftshealthplan.com

CIGNA HealthCare	1-800-244-1870
CIGNA CentralCare	www.cigna.com
Fallon Community	1-800-868-5200
Health Plan, Fallon	www.fchp.org
Senior Plan Preferred	
Harvard Pilgrim Health Care	1-800-333-4742
Preferred 65	www.harvardpilgrim.org
First Seniority	1-800-421-3550
Health New England,	1-800-310-2835
Health New England MedRate	www.healthnewengland.com
Neighborhood Health Plan	1-800-462-5449

Other Benefits

Tufts Health Plan, Tufts

Tufts Secure Horizons

Medicare Complement,

ŀ	Employee Assistance	617-558-3412
Ĺ	Program (EAP) Accessed by	www.unitedbeavioralhealth.com
L	Managers and Supervisors	
ŀ	Dependent Care Assistance Pro	ogram (DCAP) 1-800-819-9833
Ĺ	Health Care Spending Account (H	ICSA) (Sentinel Benefits) mass.gov/gio
ŀ	Long Term Disability	1-866-847-6343
L	(CNA)	www.maemployeesltd.com
ŀ	Life Insurance and AD&D	mass.gov/gic/lifeinsurance.htm
Ĺ		Call the GIC 617-767-2310x801
Ĺ	LifeBalance®	1-800-654-1446
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GIC Retiree Dental Plan
(Altus Dental)

GIC Retiree Vision Discount Plan
(Davis Vision)

Dental Benefits for Managers, Executive
Office and Legislative Staff only (Delta)

1-877-223-0588
www.altusdental.com
1-800-783-3594
www.davisvision.com
1-800-553-6277
www.deltamass.com

Vision Benefits for Managers, Executive 1-800-650-2466
Office and Legislative Staff only (Davis Vision) www.davisvision.com

Group Insurance Commission 1-617-727-2310
mass.gov/gic
TDD/TTY Access 1-617-227-8583

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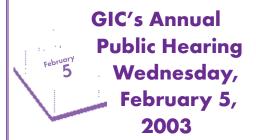
Your Personalized GIC Benefit Statement Will Be Delivered to Your Home by the **Beginning of February**



Review your statement to be sure it accurately reflects your:

- Health insurance
- Dependent coverage
- Basic life insurance
- Optional life insurance
- Beneficiary information
- Long Term Disability (LTD)
- GIC Dental/Vision coverage for managers, legislative and executive office staff
 - Retiree dental

If you notice any errors or outdated information, follow the instructions and complete the forms included. If everything is correct, you do not need to do anything. File it with your important papers, as it is the only statement you will receive in 2003.



10 AM to Noon Minihan Hall, 6th Floor Charles F. Hurley Building 19 Staniford Street, Boston

All state employees and retirees are welcome to attend our annual public hearing. The GIC will describe prospective benefit changes and attendees are invited to express their views.

This publication has been approved by State Purchasing Agent Philmore Anderson III

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Printed on recycled paper

- ➤ GIC Indemnity Plan to Change Its Name ➤ Herbal Supplements Are 1901 Always Sate
- ➤ The GIC Attacks Skyrocketing Health Care Costs
 - ➤ New Pre-tax Health Care Spending Account

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Dependents with Access to Quality Care at a Reasonable Cost Providing Massachusetts State Employees, Retirees, and Their